



UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

Michael Stacker
D.I.N.# 19R 2165

22-cv-1268

Cape Vincent Correctional Facility
Plaintiff,

CIVIL RIGHTS COMPLAINT
42 U.S.C. § 1983

[Insert full name of plaintiff/prisoner]

JURY DEMAND

YES _____ ☒ NO No

-against-

N.Y.P.D. Detectives
At Queens 115th Precinct

Gujarati, J.

Detective McFadden Badge #6001
Detective Huzar Badge #5263
Detective Zeledon Badge #5797
Defendant(s).

Henry, M.J.

[Insert full name(s) of defendant(s). If you need additional space, please write "see attached" and insert a separate page with the full names of the additional defendants. The names listed above must be identical to those listed in Part I]

- I. **Parties:** (In item A below, place your name in the first blank and provide your present address and telephone number. Do the same for additional plaintiffs, if any.)

A. **Name of plaintiff** Michael Stacker D.I.N.# 19R2165

If you are incarcerated, provide the name of the facility and address:

Cape Vincent Correctional Facility
Route 12 E, P.O. Box 739
Cape Vincent, N.Y. 13618

Prisoner ID Number: 19R2165

If you are not incarcerated, provide your current address:

Telephone Number:

B. List all defendants. You must provide the full names of each defendant and the addresses at which each defendant may be served. The defendants listed here must match the defendants named in the caption on page 1.

Defendant No. 1

Detective Michael McFadden
Full Name
Police Detective
Job Title
115th Precinct
Queens, N.Y.
Address

Defendant No. 2

Detective Huzar
Full Name
Police Detective
Job Title
115th Precinct
Queens, N.Y.
Address

Defendant No. 3

Detective Zeledon
Full Name
Police Detective
Job Title
115th Precinct

Queens, N.Y.
Address

Defendant No. 4

Full Name

Job Title

Address

Defendant No. 5

Full Name

Job Title

Address

II. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 ½ by 11 sheets of paper as necessary.)

Where did the events giving rise to your claim(s) occur? #1st incident 12-1-17
Queens, N.Y. when being followed by the above
named detectives who did not have a warrant
When did the events happen? (include approximate time and date) #2nd incident 2-23-18
in Queens, N.Y. when being followed while I
was giving estimates to the above incidents.

Facts: (what happened?)

After giving estimates to my customers for roof repairs and paving repairs the above named detectives alleged to my Parole Officers that they have arrested me on 2-23-18 after giving an estimate to Mrs. Kraft and while I was in my vehicle a plain clothes officer was approaching my car door I got scared and drove away and on 2-26-18 I was arrested in Staten Island by Det. McFadden and Det. Huzar and Det. Zeledon who falsely claimed that they arrested me on 2-23-18 and called my Parole Officers stating I was in custody on 2-23-18. My Parole Officers did issue a PAROLE WARRANT #784700 Parole Warrant that was not issued until 3-1-18 I did go to a Parole Hearing on 3-12-18 and all the above detectives charges were dismissed due to lying of injuries that they sustained and lying about dates of arrests.

II.A. Injuries. If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

No injuries and the above detectives and Queens A.D.A. Allison Wright had tried to make Parole Officers lie and not mention anything to do with the arrest on 2-23-18 which never happened these alleged allegations have led to false imprisonment.

ON CASE# 949-2018 / 883-2018 / CR-008060-18QN
ON 11-1-2019 I WAS SENT TO PRISON

For 6 years and they need to be held accountable for the misconduct and the abuse and lying and fabricating false police reports.

III. Relief: State what relief you are seeking if you prevail on your complaint.

That all the above mentioned detectives and the police reports be held accountable and be removed from the N.Y.P.D. without pay and any of their supervisors whose names are on the police reports, or any official who abused their shield pertaining to this case. I am suing for \$20 million.

I declare under penalty of perjury that on 3-3-22, I delivered this
(date)
complaint to prison authorities at CAPE VINCENT to be mailed to the United
(name of prison)
States District Court for the Eastern District of New York.

I declare under penalty of perjury that the foregoing is true and correct.

Dated: 3-3-22

Mike Starks
Signature of Plaintiff

CAPE VINCENT CORRECTIONAL FACILITY
Name of Prison Facility or Address if not incarcerated

Route 12E PO Box 739
CAPE VINCENT NY 13618

Address

19 R 2165
Prisoner ID#

I respectfully submit this 1983 Lawsuit against the State of New York, N.Y.P.D. in which I filed the original appeal to the 2nd Department was under section 1983 that the State actors have to respect the Bill Of Rights and my due process that was manipulated by the A.D.A. of Queens County and the detectives working this case. My complaints were sent to all the judges. In fact Judge Camacho had received my letters of the misconduct and on 10-3-19 he recommended time served my lawyer Howard Greenburg did not appear for 22 months due to his wife battling stage 4 cancer. I advised Judge Zayas on 10-10-19 that Judge Camacho recommended time served and the A.D.A. once again manipulated that this took place before Judge Camacho. I was never put in a lineup in which the detectives stated I was positively identified. Thank You Sincerely for the wisdom of this court. *Mil Stuen* 19R2165, 3-3-22

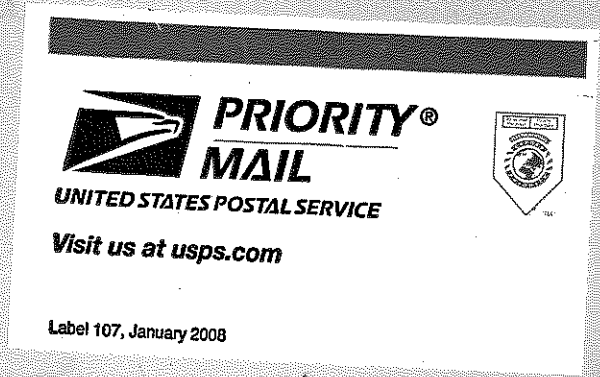
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MICHAEL STACKER 1932115
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